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CONFIRMATION NO. 7308

<b>SERIAL NUMBER</b> 10/650,467	<b>FILING OR 371(c) DATE</b> 08/28/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> 28341/6223.NDV1	
<b>APPLICANTS</b> David E. Lowery, Portage, MI; Timothy G. Geary, Kalamazoo, MI; Teresa M. Kubiak, Richland, MI; Martha J. Larsen, Kalamazoo, MI;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/721,870 11/24/2000 PAT 6,632,621 which claims benefit of 60/167,523 11/24/1999					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/24/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 04743					
<b>TITLE</b> G protein-coupled receptor-like receptors and modulators thereof					
<b>FILING FEE RECEIVED</b> 1004	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		